| AMENDMENT TRANSMITTAL LETTER | | | | | | Docket No. 21058/1206447-US2 | |
|---|---------------------------------|------------------------------|-----------------------------------|---------------|----------------|---------------------------------|-------------|
| Application No. | | Filing Date | | | Examiner | 21030/1 | Art Unit |
| 10/660,902-Conf. #6375 | | September 12, 2003 | | A. M. Bertagr | | na | 1637 |
| Applicant(s): Xing | Su et al. | | | | | | |
| Invention: METHO | DDS TO INCRI | EASE NUCLE | OTIDE SIGNA | ALS B | Y RAMAN SC | ATTERIN | IG |
| | TC | THE COMMI | SSIONER FO | OR PA | TENTS | | |
| Transmitted here | | | | | olication. | | |
| The fee has been calculated and is transmitted as shown below. | | | | | | | |
| CLAIMS AS AMENDED Claims Highest | | | | | | | |
| | Remaining After Amendment | Number Previously Paid | Number Extra Claims Present | | Rate | | |
| Total Claims | 12 | - 20 = | 0 | Х | 50.00 | | 0.00 |
| Independent Claims | 1 | - 3 = | 0 | Х | 210.00 | | 0.00 |
| Multiple Depend | lent Claims (ch | eck if applicabl | e) | | | | |
| | | | | | | | |
| Other fee (pleas | e specify): | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | | | 0.00 |
| x Large Entity | | | | | Small Entity | | |
| x No additiona | ıl fee is require | d for this amer | ndment. | | | | |
| Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed. | | | | | | | |
| A check in th | ne amount of \$ | | to cover | the filii | na fee is encl | osed. | |
| | credit card. Fo | | | | g | | |
| The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 | | | | | | | |
| | below. A dup | | | | | J | |
| x Credit a | ny overpaymer | nt. | | | | | |
| x Charge a | any additional fil | ing or applicatio | n processing t | fees red | quired under 3 | 37 CFR 1.1 | 6 and 1.17. |
| /Raj S. Dave/ | | | | | Dated: | | |
| Raj S. Dave | | | | | | Waren Le | , 2000 |
| Attorney/Agent | Reg. No.: 42, | 465 | | | | | |
| DARBY & DAR | | | | | | | |
| 1500 K Street, I Suite 250 | NVV | | | | | | |
| Washington, D0 | | | | | | | |
| (202) 347-7865 | | | | | | | |
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